

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:
Apparatus For Rectifying Round Pipe and Tubing the specification of which:

☒ is attached hereto.
☐ was filed on: _____, as Application Serial No. _____.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

PRIOR FOREIGN APPLICATION(S):

<u>Priority Claimed</u>	<u>Number</u>	<u>Country</u>	<u>Date Filed</u>
Yes	PCT/AU2004/000726	PCT	23 June 2003

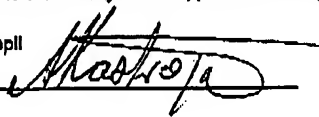
I hereby claim the benefit under Title 35, United States Code, §120 of any United States Application(s) listed below, and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.) (Filing Date)

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, with full power of substitution and revocation:

<u>Name</u>	<u>Registration No.</u>	<u>Address Telephone Calls and Correspondence to:</u>
Jo Katherine D'Ambrosio	35,671	Jo Katherine D'Ambrosio
Elizabeth Hall	37,344	D'Ambrosio & Associates, P.L.L.C.
		10260 Westheimer Rd., Suite 465
		Houston, Texas 77042
		(713) 975-0800

I hereby declare that all statements made of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

INVENTOR'S FULL NAME: Anthony Kastropil
INVENTOR'S SIGNATURE: 
CITIZENSHIP: Australia
RESIDENCE ADDRESS: 130-140 Merrindale Drive
Croydon South
Victoria 3136, Australia
POST OFFICE ADDRESS:

Date: 20/12/05

INVENTOR'S FULL NAME:
INVENTOR'S SIGNATURE: _____
CITIZENSHIP: United States
RESIDENCE ADDRESS:
POST OFFICE ADDRESS:
ADDITIONAL JOINT INVENTOR(S) LISTED ON ATTACHED SHEET: ☐ Yes ☒ No